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JAN 1 8 2010

Administrative Office of the Courts
BY THE COURTS

JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING DECEMBER 31, 20/0

DECEMBER 31, 2078	
GENERAL INFORMATION	JAN 22 2010
Name Alvin C. Kacin	COMMISSION ON ETHICS
Title Eluo Township Justice of the	and M
Mailing address PO Box 176	- Municip
Eluo, NV 89803	
Length of residence in Nevada 16 years	
County in which you are registered to vote	
Length of residence in the county in which you are resident.	0.01
COMPENSATION FOR EXTRA-HIDIGIAL	مراكز المراكز
name of the payor, and the amount of the compensation so received. See Canon 4I(2)(a)(ii) Date Nature and Place of Avii in	
None Name of Payor	Amount
INCOME	
Disclose each source of income received by you and by each member of your household we ge or older. No listing of individual clients, customers, or patients is required. Income receives should be disclosed under a general heading such as "professional services." See Castach additional sheets if necessary. Source of Income Recipient (Eluo County) Employee Salary Minningstan Raquel	ho is 18 years of ceived from such anon 4I(2)(a)(iii).
	Name Carry Carry County County

REAL PROPERTY

Disclose the specific location, nature, and particular use of any real estate which has a fair market value of \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or \$2,500 or more, other than your personal residence.

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Disclose the date, place, name of the donor, amount, and nature of any gift, bequest, favor or on oan to you or to a member of your family residing in your household if its value exceeded \$200, unless this disclosure is not a member of your family residing in your household if its value exceeded \$200. GIFTS, BEQUESTS, FAVORS, OR LOAN a member of your family residing in your household if its value exceeded \$200, unless this disclosure is not required by Section 4D of the Code of Judicial Conduct. See especially Canon 4D(5)(h) and 4I(2)(a)(vii).

Attach additional sheets if necessary. Attach additional sheets if necessary.

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND COMPLETE.

File this form with the State Court Administrator.

Deliver or mail to:

State Court Administrator Administrative Office of the Courts 201 S. Carson Street, Suite 250 Carson City, Nevada 89701-4702

Telephone: (775) 684-1700